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(2022)

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Roche to collaborate with Bristol Myers Squibb, 04/22:65
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Elecsys Amyloid Plasma Panel granted breakthrough device designation, 08/22:46
Study: chronic HBV, latent TB coinfections and testing, 08/22:46
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New add-on digital pathology codes, 08/22:45
For *HER2*-mutant NSCLC, FDA grants accelerated approval to Enhertu, approves companion diagnostics, 09/22:54
FDA approves Enhertu for patients with HER2-low metastatic breast cancer, 09/22:54

Q&A

When performing reagent lot-to-lot correlation studies, some staff believe it is better to perform instrument calibration before a new reagent lot check while others believe calibration is not necessary. What is the appropriate practice? (Wielgos), 03/22:57

Is it necessary to perform a manual cell count for body fluids, including CSF, using a hemocytometer? Can clinical decisions be made based on low cell counts in body fluid reported by automated cell counters since these instruments have decreased precision and accuracy with low counts? (Galeotti), 04/22:60

Is there a time limit for a critical value? (Nichols, Eby), 04/22:60

What validation studies are necessary before implementing an alternative blood specimen collection tube? (Keller), 04/22:60

Should peritoneal dialysis fluid collected directly from a patient be considered peritoneal fluid or peritoneal dialysate fluid? (Chang), 05/22:52

What types of materials can be used to check new reagent lots on my chemistry analyzer? Is it necessary to perform reagent lot studies on all chemistry analyzers of the same model? (Parpart), 05/22:52

Can bronchoalveolar lavage specimens from multiple lobes be pooled for culture? Can multiple biopsies from the same joint be pooled for culture? (Kerantzas), 06/22:64

We verify our reference intervals with each new reagent lot for coagulation tests (PT, APTT, fibrinogen, and TT). What difference in values between lots necessitates establishing a new reference interval? (Smock), 06/22:64

When a patient has a hematocrit level of ≥ 55 percent and a normal PT and APTT, do you still correct sodium citrate and ask for a redraw? Is it crucial to ask for a redraw when the emergency department orders a stat PT and APTT? (Smock), 07/22:76

Obtaining an accurate blood glucose level is hindered by continued glycolysis in the evacuated tube post collection, even if a gray top tube is used. This leads to falsely low blood glucose levels. What can laboratories do to limit ex vivo glycolysis? (Sacks), 07/22:76

Every month, our anatomic pathology laboratory amends patient reports. Does the CAP have a benchmark for amended reports, such as how many

are acceptable per month? (Parkash, Aguilera, Hosseini, Auerbach), 08/22:42

What is the best practice for performing a urine specific gravity test? Which method is preferred—a refractometer or an automated dipstick? Should we correct for elevated glucose and protein or report high specific gravity? Should we correct for x-ray dyes or add a comment and list possible interfering substances? (Skleton), 08/22:42

The laboratory at which I work uses two PT programs— from the CAP and an alternate provider—for dermatologists who perform fungal smears. Our lab administers challenges for both programs every six months. The dermatologists have variably passed and failed challenges from both programs such that the record of satisfactory challenges alternates between the CAP and the alternate provider's programs. Is our approach allowed? Do we need to stick with a single PT provider for one year before switching? (Wielgos), 09/22:48

Should flow cytometry be used to test a cerebrospinal fluid specimen with known or suspected Creutzfeldt-Jakob disease? Our hospital administration is pushing to run such samples. I think the testing should not be done because it would contaminate the instrument and potentially endanger the flow techs. (Rhoads), 09/22:48

How many blocks should a histotechnologist with multiple responsibilities cut per day in a semiautomated laboratory? (Parkash), 10/22:66

Is it acceptable to release results from an analyzer with flags or alarms if a pathologist sends an email instructing to do so, even if the manufacturer's instructions state that results with flags or alarms should be verified by another method before reporting? (McCall), 10/22:66

How useful is an aPTT value if the value falls below the reference interval? (Chan, Ritter), 10/22:66

Is secretory change in endometrial hyperplasia acceptable in the absence of progestin therapy? What is the appropriate way to address an endometrial biopsy with secretory glandular changes and an increase in the gland-to-stroma ratio? (Parkash), 11/22:59

Is it necessary to accept or reject established target values based on total analytical error? Or is there an alternative way to do that? (Skelton), 11/22:59
Should an accelerated APTT result be canceled for being clotted, even in the absence of a visible clot? (Chan, Ritter), 11/22:59
What is the appropriate way to measure or identify microcytosis or macrocytosis? (Agarwal, Skelton), 12/22:43
Is there an optimal dose for RhIg or suggested timing of administration to prevent anti-D alloimmunization in a six-year-old female with B-cell acute lymphoblastic leukemia and Rh-negative blood who is being treated with myeloablative chemotherapy to achieve durable remission or as a bridge to stem cell transplantation, during which supportive transfusions will include repeated platelet transfusions over many weeks? (Pagano, Uhl, Ramsey), 12/22:42
How many blocks? (Parkash), 12/22:42

Quality assurance/quality control/quality improvement
Histology lab tips for top-tier whole slide images, 07/22:01

Race/ethnicity
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Recommended reading
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Advances in detection of mesothelioma in cytology pleural fluid specimens, 08/22:36

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Training (see Laboratory training)

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Why yearly testing of health care workers is a waste, 01/22:05

Tumor mutational burden
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Urine test ordering—good and going for better, 12/22:01

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Visualization software/dashboards
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Waived tests
New for waived-only labs: a custom GEN checklist, 12/22:22

Whole slide imaging
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